



Biovigilance Component Hemovigilance Module Facility Enrollment or Component Activation



Objectives

- ❑ **Provide an overview of the National Healthcare Safety Network (NHSN) and the Hemovigilance Module**
- ❑ **Learn how to enroll in NHSN for facilities new to NHSN**
- ❑ **Learn how to activate the Biovigilance Component for facilities already enrolled in NHSN**
- ❑ **Understand location mapping in NHSN**



National Healthcare Safety Network

- ❑ NHSN is a secure, Internet-based surveillance system managed by the CDC's Division of Healthcare Quality Promotion (DHQP)**
- ❑ The Hemovigilance Module is designed for transfusion services staff in healthcare facilities to monitor recipient adverse reactions and quality control incidents related to blood transfusions**

Purposes of NHSN

- ❑ **Collect data from a sample of healthcare facilities to permit valid estimations of the:**
 - Magnitude of adverse events
 - Adherence to practices to prevent adverse events
- ❑ **Analyze and report collected data to permit recognition of trends**
- ❑ **Provide facilities with data that can be used for inter-facility comparisons and local quality improvement activities**

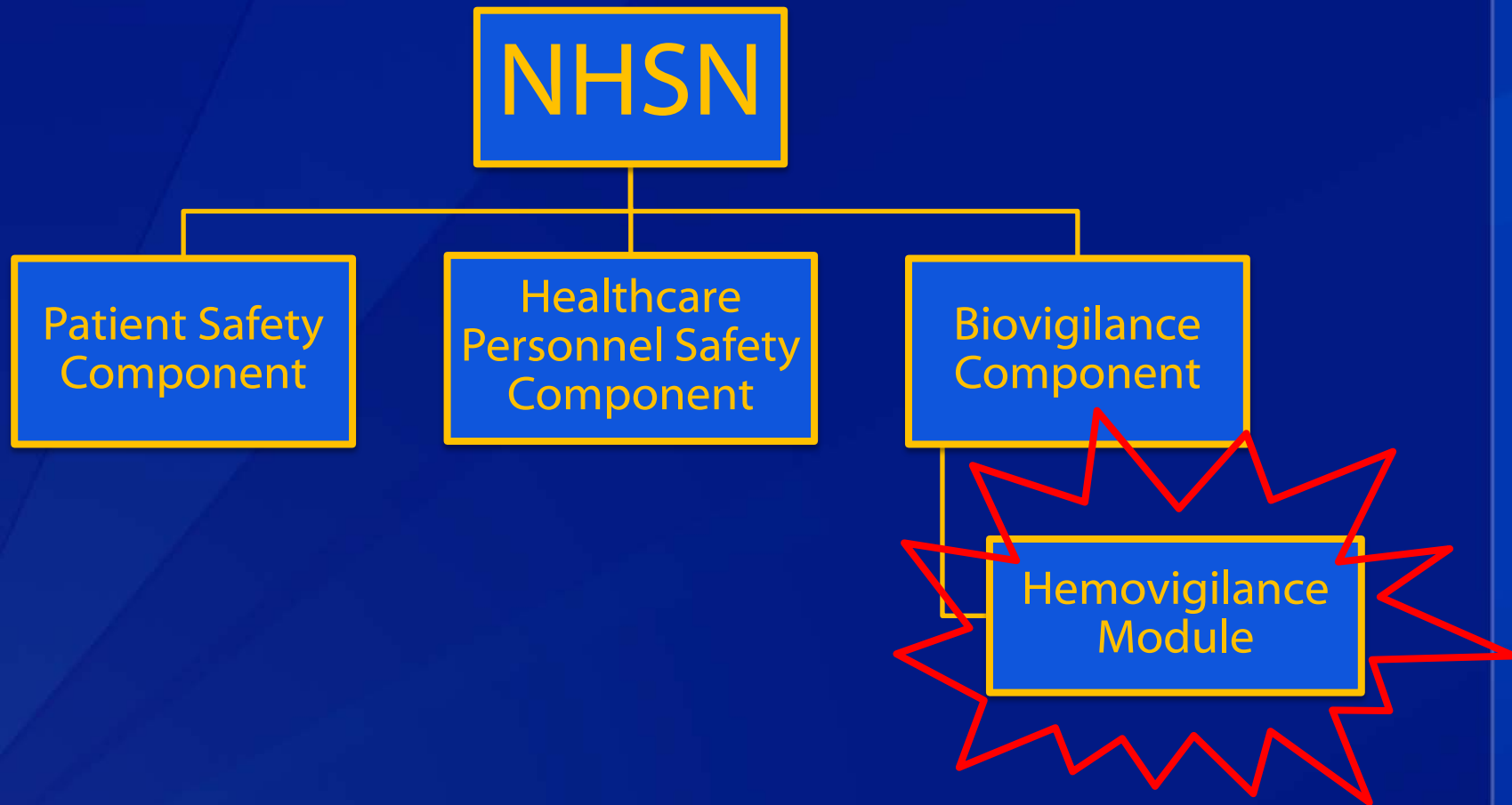
A comprehensive list of purposes can be found on the Web site:

<http://www.cdc.gov/nhsn/>

Assurance of Confidentiality

- “The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Section 304, 306, and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).”

NHSN Structure



Hemovigilance Module

- ❑ **The Hemovigilance Module requires surveillance from product receipt from suppliers to administration to patients**
- ❑ **The Hemovigilance Module captures:**
 - Incidents related to the transfusion process
 - Errors and accidents that could lead to adverse reactions in transfusion recipients
 - Adverse transfusion reactions
 - Undesirable response or effect in a patient temporally associated with a transfusion
 - Denominators
 - Total number of units and/or aliquots of specified blood products transfused each month and samples collected for type and screen and/or crossmatch



Key Roles in NHSN

❑ Facility Administrator

- The person enrolling the facility in NHSN
- Only person who can activate additional components for a facility
- Has add/edit/delete rights to facility data, users, and users' access
- Has authority to nominate/join groups for data sharing
- Only person who can reassign the role of Facility Administrator to another user

❑ Component Primary Contact

- Someone who is familiar with the facility's transfusion services
- Interacts most closely with CDC for the component

❑ Users

- Rights are determined by Facility Administrator: view data, data entry, data analysis
- May be given administrative rights

❑ One person may fill multiple roles



Getting Started in the Hemovigilance Module

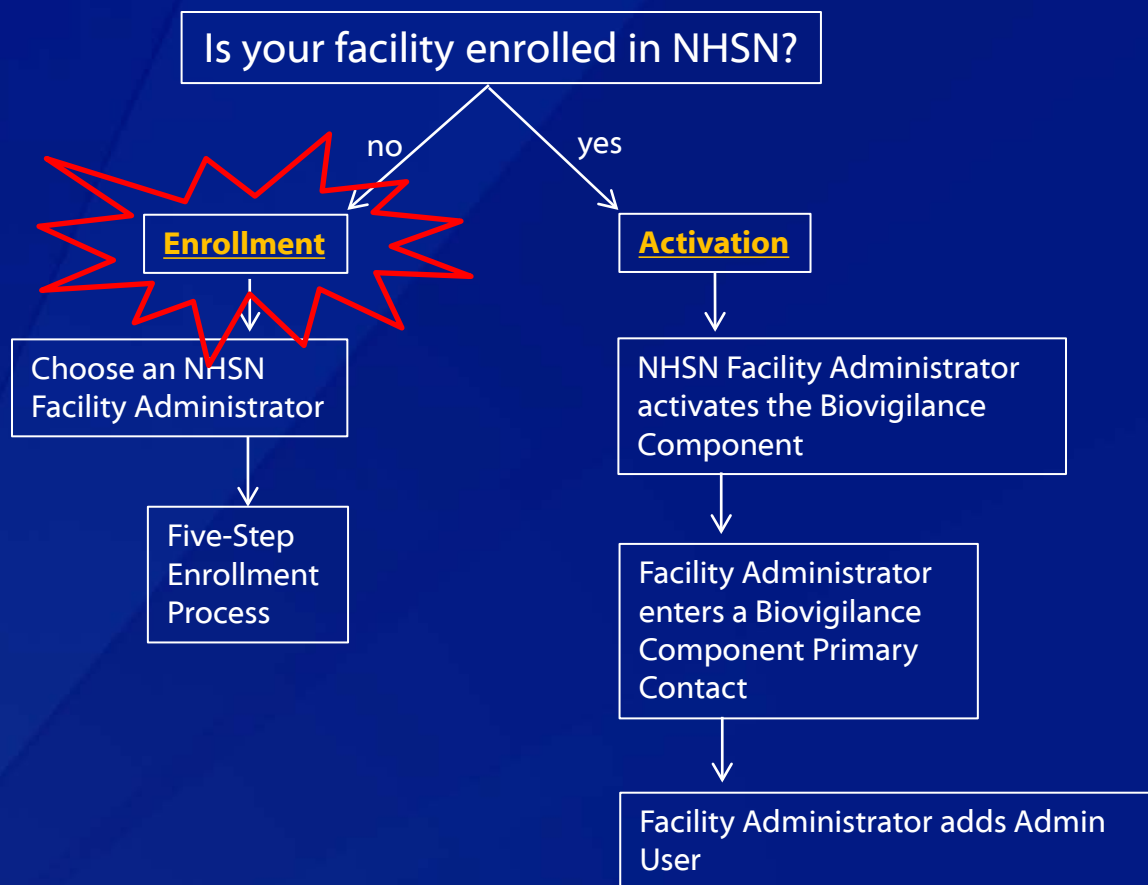
❑ Enrolling in NHSN

- Facilities that are currently not participating in NHSN and wish to participate must **enroll** their facility in NHSN
 - Please visit <http://www.cdc.gov/nhsn/enroll.html> for more information regarding the enrollment process
- During the enrollment process, facilities may choose to participate in any of the NHSN components

❑ Activating the Biovigilance Component

- Facilities that are **already enrolled** in NHSN and wish to participate in the Biovigilance Component must **activate** the component within NHSN

Getting Started in the Hemovigilance Module



Are you unsure of your facility's status with NHSN?

- Email nhsn@cdc.gov



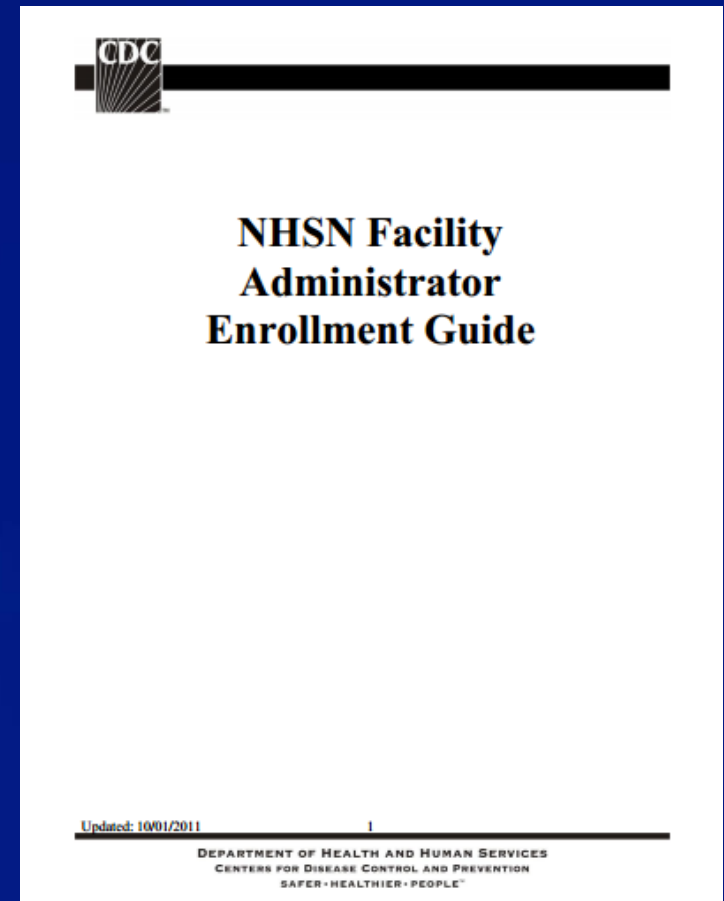
Enrollment of Facilities in NHSN

❑ Choose an NHSN Facility Administrator

- This role should be filled by someone in the facility who has the authority to make decisions regarding facility and patient data

❑ Read the NHSN Facility Administrator Enrollment Guide

- Available on the Web site at www.cdc.gov/nhsn
- Please read this guide before enrollment



Five-Step Enrollment Process

1. Enrollment Preparation

2. Register

Receive 'Welcome to NHSN' email

3a. Request Digital Certificate

Receive 'NHSN Digital Certificate Request Confirmation' email

3b. Install Digital Certificate

Receive 'Action Required-Digital Certificate is Ready to Install' email

4. Submit Forms Electronically

Receive 'NHSN Facility Enrollment Submitted' email

5. Sign and Send Consent

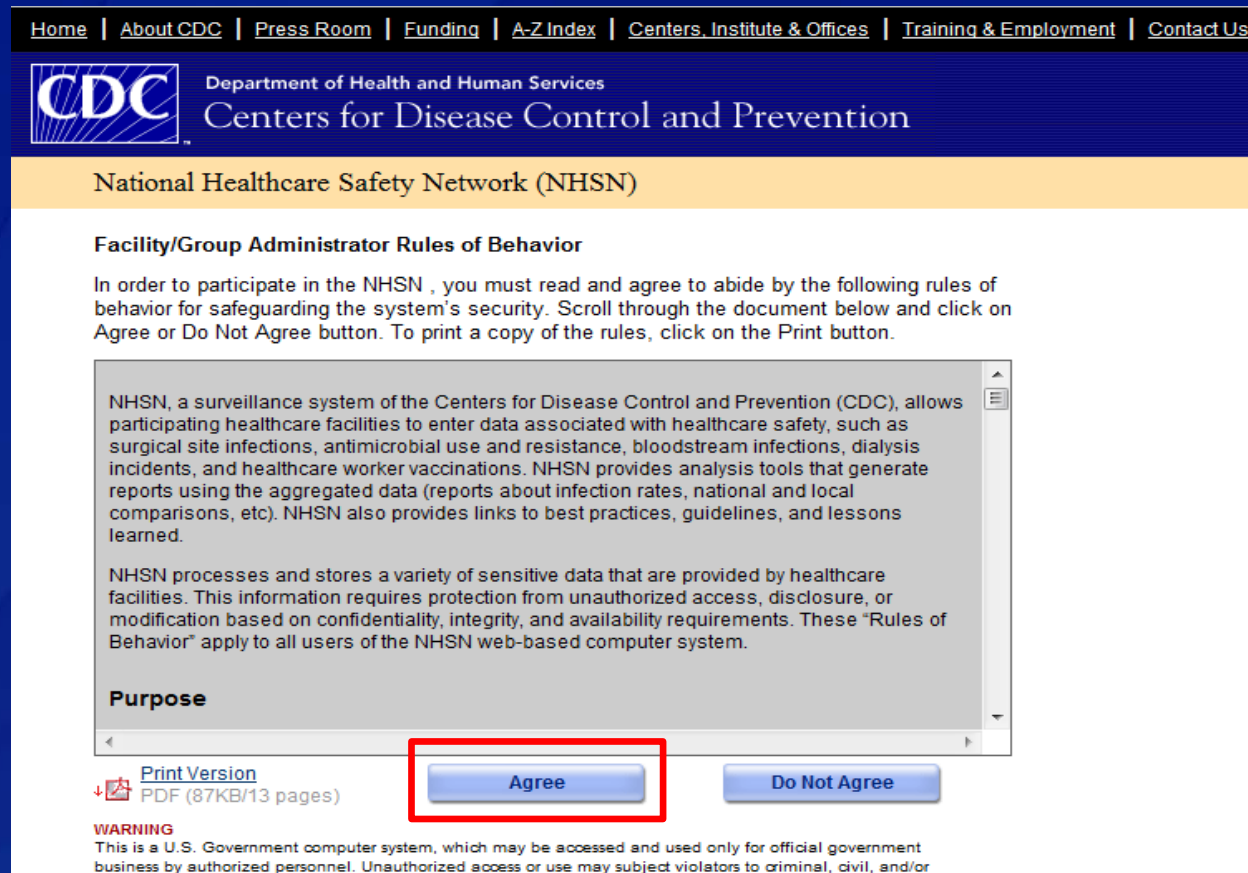
Receive 'NHSN Enrollment Approved' email

Step 1 – Enrollment Preparation

- ❑ **Read the enrollment materials before beginning enrollment**
 - “NHSN Facility Administrator Enrollment Guide”
 - “Purposes, Eligibility, Requirements and Confidentiality”
 - “NHSN Rules of Behavior for Facility/Group Administrators”
 - Enrollment materials can be found at <http://www.cdc.gov/nhsn/library.html>
- ❑ **Review the Biovigilance Component-related training materials at <http://www.cdc.gov/nhsn/bio.html>**
- ❑ **Installing the digital certificate may require assistance from your IT department**
 - Update spam-blockers to allow emails from nhsn@cdc.gov and PHINTech@cdc.gov
 - Add https://*.cdc.gov and https://*.verisign.com to trusted sites and disable all pop-up blockers

Step 2 – Register

- ❑ Go to <http://nhsn.cdc.gov/RegistrationForm/index.jsp>
- ❑ Read and agree to the Rules of Behavior



The screenshot displays the NHSN registration interface. At the top is a navigation bar with links: Home, About CDC, Press Room, Funding, A-Z Index, Centers, Institute & Offices, Training & Employment, and Contact Us. Below this is the CDC logo and the text "Department of Health and Human Services" and "Centers for Disease Control and Prevention". A yellow banner reads "National Healthcare Safety Network (NHSN)". The main section is titled "Facility/Group Administrator Rules of Behavior". It contains a paragraph explaining that users must agree to the rules for participating in the NHSN system. Below this is a scrollable text box containing the full text of the "Rules of Behavior", which describes the NHSN surveillance system, the types of data collected, and the security measures in place. The text box is titled "Purpose". At the bottom of the page, there is a "Print Version" link, a "PDF (87KB/13 pages)" link, and two buttons: "Agree" and "Do Not Agree". The "Agree" button is highlighted with a red rectangle. A "WARNING" section at the very bottom states that the system is for official government business only.

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CDC Department of Health and Human Services
Centers for Disease Control and Prevention

National Healthcare Safety Network (NHSN)

Facility/Group Administrator Rules of Behavior

In order to participate in the NHSN , you must read and agree to abide by the following rules of behavior for safeguarding the system's security. Scroll through the document below and click on Agree or Do Not Agree button. To print a copy of the rules, click on the Print button.

NHSN, a surveillance system of the Centers for Disease Control and Prevention (CDC), allows participating healthcare facilities to enter data associated with healthcare safety, such as surgical site infections, antimicrobial use and resistance, bloodstream infections, dialysis incidents, and healthcare worker vaccinations. NHSN provides analysis tools that generate reports using the aggregated data (reports about infection rates, national and local comparisons, etc). NHSN also provides links to best practices, guidelines, and lessons learned.

NHSN processes and stores a variety of sensitive data that are provided by healthcare facilities. This information requires protection from unauthorized access, disclosure, or modification based on confidentiality, integrity, and availability requirements. These "Rules of Behavior" apply to all users of the NHSN web-based computer system.

Purpose

[Print Version](#)
PDF (87KB/13 pages)

[Agree](#) [Do Not Agree](#)

WARNING
This is a U.S. Government computer system, which may be accessed and used only for official government business by authorized personnel. Unauthorized access or use may subject violators to criminal, civil, and/or

Step 2 – Register

□ Personal Information

- This is the person who will be the NHSN Facility Administrator
- The email address must be the same for all steps of the process

□ Facility Identifier

- Select one and enter the number

□ NHSN Training Date

- This is the date you completed all the required training

The screenshot displays a registration form with three main sections, each enclosed in a light gray box with a title bar.

- Personal Information:** Contains four text input fields labeled with red asterisks: "Last name:", "First name:", "Middle name:", and "Email address:". The "Email address:" field is highlighted with a yellow border.
- Facility Identifier:** Contains a red asterisk label "Please select a facility identifier:" followed by four radio button options: "CCN ID", "AHA ID", "VA Station Code", and "CDC Registration ID". Below these is a "None" option. A red asterisk label "Selected identifier ID:" is followed by a text input field.
- NHSN Training Date:** Contains a red asterisk label "I certify that I have completed all of the appropriate, required NHSN trainings on:" followed by a date picker widget.

At the bottom right of the form, there are two buttons: "Reset" and "Save". The "Save" button is highlighted with a red rectangular border.

Response from CDC: Welcome to NHSN Email

Welcome! You are now registered in the National Healthcare Safety Network (NHSN).

In order to begin the NHSN enrollment process, you will need to obtain and install a digital certificate onto your computer.

Follow the instructions in the document "NHSN Facility Administrator Enrollment Guide" beginning at Step 3, to obtain and install the digital certificate so that you will be able to access the NHSN application through CDC's Secure Data Network (SDN). This document can be accessed at: http://www.cdc.gov/ncidod/dhqp/nhsn_documents.html.

- ❑ Following successful registration, you will immediately receive a welcome to NHSN email with instructions to request a digital certificate

Step 3a – Request Digital Certificate

- ❑ **Secure Data Network (SDN) provides secure online access to and exchange of information between CDC and public health partners**
- ❑ **Users enroll in SDN and obtain a digital certificate to gain access to CDC applications, including NHSN**
- ❑ **Digital Certificate**
 - Electronic document installed on a user's computer
 - Allows for encrypted data transfer
 - Assures that the data have not been changed in transit
 - Certifies that the certificate owner transmitted the data
 - Renewed annually – email is sent 30 days before expiration



Important Facts Digital Certificates and Email

- ❑ **A person cannot obtain a digital certificate without first being added as a user, with the exception of a Facility Administrator**
- ❑ **Every new user must obtain a digital certificate**
- ❑ **One digital certificate gives a user access to ALL facilities in which they are a user**
 - i.e., one email address, one digital certificate
- ❑ **Digital certificates can be installed on additional computers if necessary**
- ❑ **Multiple certificates can be installed on the same computer**
- ❑ **Most communication from CDC to users is by email**
 - You **must** use the same email address throughout the NHSN enrollment or activation process as well as the application process for your digital certificate

Step 3a – Request Digital Certificate

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Centers for Disease Control and Prevention - Digital ID Enrollment

SDN Support

800-532-9929
770-454-4863
phintech@cdc.gov

WARNING

This is a U.S. Government computer system, which may be accessed and used only for official government business by authorized personnel. Unauthorized access or use may subject violators to criminal, civil, and/or administrative action. There is no right to privacy on this system. All information on this computer system may be monitored, intercepted, recorded, read, copied, and shared by authorized personnel for official purposes including criminal investigations. Access or use of this system, whether authorized or unauthorized, constitutes consent to these terms. (Title 18, U.S.C.)

Enter Enrollment Password


Please enter the password for CDC's Digital ID Services and click *Accept*.

Password:

[Questions? Go to the Online Help](#) or [Contact SDN Support](#)

- ❑ The Web site and password needed are provided to you in the email received upon completion of Step 2

Step 3a – Request Digital Certificate



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Centers for Disease Control and Prevention - Digital ID Enrollment

To begin enrollment for a CDC Digital ID, complete this enrollment form and click *Next*.

Please Note:

- Internet Explorer 5.x or greater or Netscape Communicator 6.x, or greater is required to use the CDC Secure Data Network. If your browser doesn't meet this requirement, please upgrade your browser before applying.
- Be sure your email address is correctly entered. Without a valid email address you will be unable to install your digital certificate.

Step 1: Enter Personal Information

Items with (*) are required.

Prefix	<input type="text"/>	Preferred Name	<input type="text"/>
* First Name	<input type="text" value="Janie"/>	Middle Name	<input type="text"/>
* Last Name	<input type="text" value="Doe"/>	Degree	<input type="text"/>
* Email Address	<input type="text" value="janiedoe@genhosp.o"/>	CDC User ID (where applicable)	<input type="text"/>
* Employer	<input type="text" value="General Hospital"/>	Program or Division	<input type="text"/>
* Employer Type	<input type="text" value="Academic/Research Organization"/>		
* Job Type	<input type="text" value="Biomedical Research"/>		

- ❏ **NOTE: remember to use the email address you used during NHSN registration**

Step 3a – Request Digital Certificate

The screenshot shows the CDC website's 'Centers for Disease Control and Prevention - Digital ID Enrollment' page. On the left is a sidebar with the CDC logo and 'SDN Support' contact information. The main content area is divided into two steps. Step 2, 'Select A Program', instructs the user to select a program and shows a dropdown menu with 'National Healthcare Safety Network (NHSN)' selected. Step 3, 'Select Activities', instructs the user to select one or more NHSN activities and shows a dropdown menu with 'NHSN Enrollment' selected.

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Centers for Disease Control and Prevention - Digital ID Enrollment

SDN Support
800-532-9929
770-454-4863
phintech@cdc.gov

Step 2: Select A Program
Select the program whose activities you want to join.

National Healthcare Safety Network (NHSN)
National Select Agent Registry
NEPHTN
NETSS
Nutrition
NVSN

Step 3: Select Activities
Select one or more National Healthcare Safety Network (NHSN) activities from the list.

NHSN Enrollment
NHSN Reporting
NHSN Upload

- ❑ **Select a Program – Select National Healthcare Safety Network (NHSN)**
- ❑ **Select Activities – Select only NHSN Enrollment**

Step 3a – Request Digital Certificate

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Centers for Disease Control and Prevention - Digital ID Enrollment

SDN Support

800-532-9929
770-454-4863
phintech@cdc.gov

Step 4: Choose a Challenge Phrase

The challenge phrase is a password or phrase that you will need to provide every time you access the CDC Secure Data Network, and is also required to revoke your Digital ID.

For security reasons, a challenge phrase must:

- Be at least 8 characters long.
- Contain only English letters, numbers or any of these characters:

- + : ' .
- Contain at least one non-alphabetic character.
- Not contain your name or any part of your email address.
- Not be a word, unless the word is either
 - Broken up by one or more non-alphabetic characters
 - Prefixed or suffixed by three or more non-alphabetic characters
- Not contain more than two consecutive repeating characters.
- Contain at least 4 unique characters.

Challenge phrases are case sensitive, so be sure to remember if any letters are capitalized. While not required, a challenge phrase containing mixed case letters is more secure, and we invite you to consider using one.

[More Information and Examples.](#)

Challenge Phrase

- ❑ Carefully follow the instructions on the page and keep a copy of your challenge phrase for future reference

Step 3a – Request Digital Certificate

- ❑ Create your SDN challenge phrase (password)**
- ❑ You will need to provide your challenge phrase (password) every time you access NHSN**
 - Make a copy of your challenge phrase (password) for future reference
 - Note upper and lowercase letters and any special characters
- ❑ Enter and confirm your SDN challenge phrase (password), choose “Next”**
- ❑ Do not share your challenge phrase, not even with IT**

Response from CDC: NHSN Digital Certificate Request Confirmation Email

- ❑ Once your challenge phrase (password) is created, you will receive confirmation that your digital certificate has been requested

From: NHSN (CDC)
Subject: NHSN Digital Certificate Request Confirmation

SDN has received your request for a digital certificate. Please do not apply for another digital certificate unless told to do so by someone from the SDN help desk. If you have not received an email from SDN within 5 working days informing you that you can download your digital certificate, or if you have trouble downloading your certificate, please contact SDN at 1-800-532-9929.

VERY IMPORTANT: To access the NHSN after you install your digital certificate, go to the SDN (<https://sdn.cdc.gov>), enter your challenge phrase, and then click on your NHSN activity.

If you have any problems with NHSN, please feel free to contact us.

Thank you!

National Healthcare Safety Network (NHSN) Support
Email: nhsn@cdc.gov

Step 3b – Install Digital Certificate

- ❑ **Within 3 business days, you will receive an email from PHINTech with digital certificate installation instructions**
 - Email subject line is “Action Required – Your CDC Digital Certificate Is Ready to Install”
- ❑ **The email contains instructions and installation links**
 - We recommend that you contact your IT department to complete the installation process
- ❑ **If you do not receive the email within 3 business days, contact SDN**
 - Email: phintech@cdc.gov
 - Telephone: 1-800-532-9929

Step 3b – Install Digital Certificate

- ❑ **Download the digital certificate onto the computer that you will use to access NHSN and report data**
 - Click the link in the “digital certificate is ready to install” email
 - You may download your digital certificate onto multiple computers
- ❑ **Carefully follow the instructions in the email for downloading the certificate**
 - Recommend involving your IT department
- ❑ **Must use Internet Explorer to download**
- ❑ **Enter your challenge phrase (password) & click “Submit”**

Step 3b – Install Digital Certificate

- Click “Download” to install digital certificate



The screenshot shows the CDC website's "Centers for Disease Control and Prevention - Digital ID Enrollment" page. On the left is a sidebar with the CDC logo and "SDN Support" contact information. The main content area is titled "Download Digital ID" and contains a warning box. The warning box has a red header "***WARNING***" and text stating that certain requirements must be met for installation. It lists two requirements: 1. Disabling pop-up and script blocker software for the "CDC.GOV" domain, and 2. Configuring the browser to use TLS 1.0 encryption. Below the list, it notes that installation may take several seconds and that the user should not click "Stop/Reload/Back". At the bottom of the page, a "Download" button is highlighted with a red rectangle.

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Centers for Disease Control and Prevention - Digital ID Enrollment

Download Digital ID

*****WARNING*****

Please note the following requirements must be met to install a certificate on your machine. If you cannot meet any of these requirements, you should not proceed with the certificate installation.

1. Pop-up and script blocker software may interfere with your ability to install a digital certificate. If pop-up and script blocker software has been installed on your machine (e.g., via Windows XP Service Pack 2 and third-party antivirus software), you must disable them or allow them for the "CDC.GOV" domain while installing your digital certificate. If you are unsure of whether or not pop-up and script blocker software is active on your machine, or you have any questions about their use, please contact your local IT support.
2. Your browser must be configured to use TLS 1.0 encryption.

The certificate installation may take several seconds to complete. You must not click your browser's **Stop/Reload/Back** button during the installation process

Download

Step 3b – Install Digital Certificate

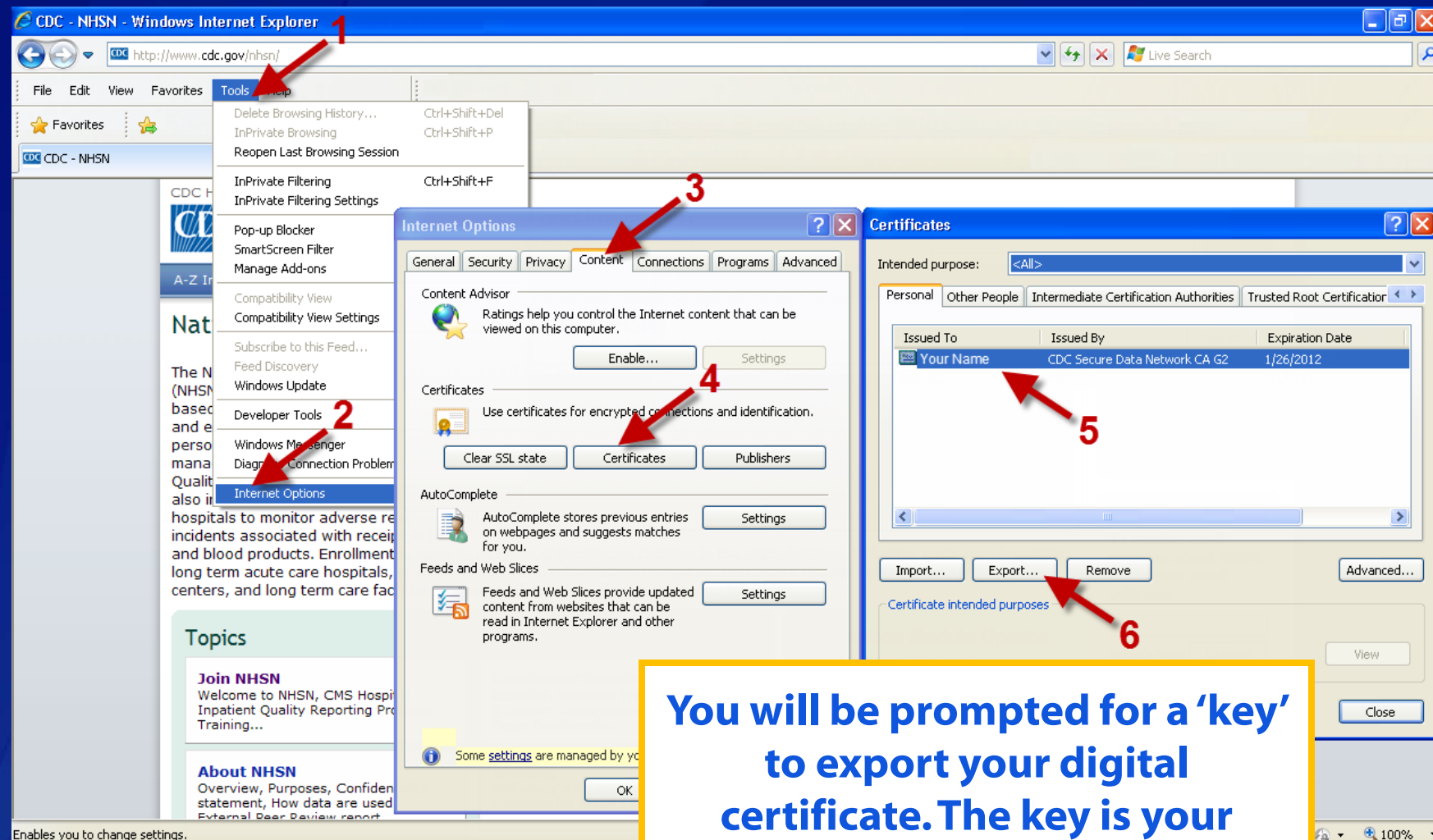
❑ Download begins automatically

- If system settings are correct
- If settings are incorrect, contact your IT dept and/or SDN
- Security warning asks if you want to install and run VeriSign Import Control, click “Yes”

❑ Once installed, confirmation certificate appears

- Verify installation in Internet Explorer
 - Click on “Tools” menu, choose “Internet Options”
 - Select the “Content” Tab, click “Certificates” button
- Save a copy of the digital certificate to an external device
 - Locate your certificate in Internet Explorer, click “Export” to save

Save a Copy of your Digital Certificate



You will be prompted for a 'key' to export your digital certificate. The key is your challenge phrase (password).

Step 3b – Install Digital Certificate

- ❑ If digital certificate is correctly installed, you will immediately be able to access <https://sdn.cdc.gov/>

CDC Public Health Partners Search CDC.gov:

Welcome

WARNING

This is a U.S. Government computer system, which may be accessed and used only for official government business by authorized personnel. Unauthorized access or use may subject violators to criminal, civil, and/or administrative action. There is no right to privacy on this system. All information on this computer system may be monitored, intercepted, recorded, read, copied, and shared by authorized personnel for official purposes including criminal investigations. Access or use of this system, whether authorized or unauthorized, constitutes consent to these terms. (Title 18, U.S.C.)

Please enter your challenge phrase:

Forgot your challenge phrase? Click [here](#)

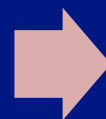
- ❑ If you cannot access SDN's Public Health Partners website, contact SDN at 1-800-532-9929

Step 4 – Submit Forms Electronically

Go to
<https://sdn.cdc.gov>



Enter Challenge
Phrase – Click
“Submit”



Under My
applications –
Click “NHSN
Enrollment”

CDC Public Health Partners

You are logged in as Search CDC.gov

[Partners Home](#) | [My Preferences](#)

My Applications

- National Healthcare Safety Network (NHSN)
 - > [NHSN Enrollment](#)
 - > [Request Additional Activities](#)

Contacts Directory

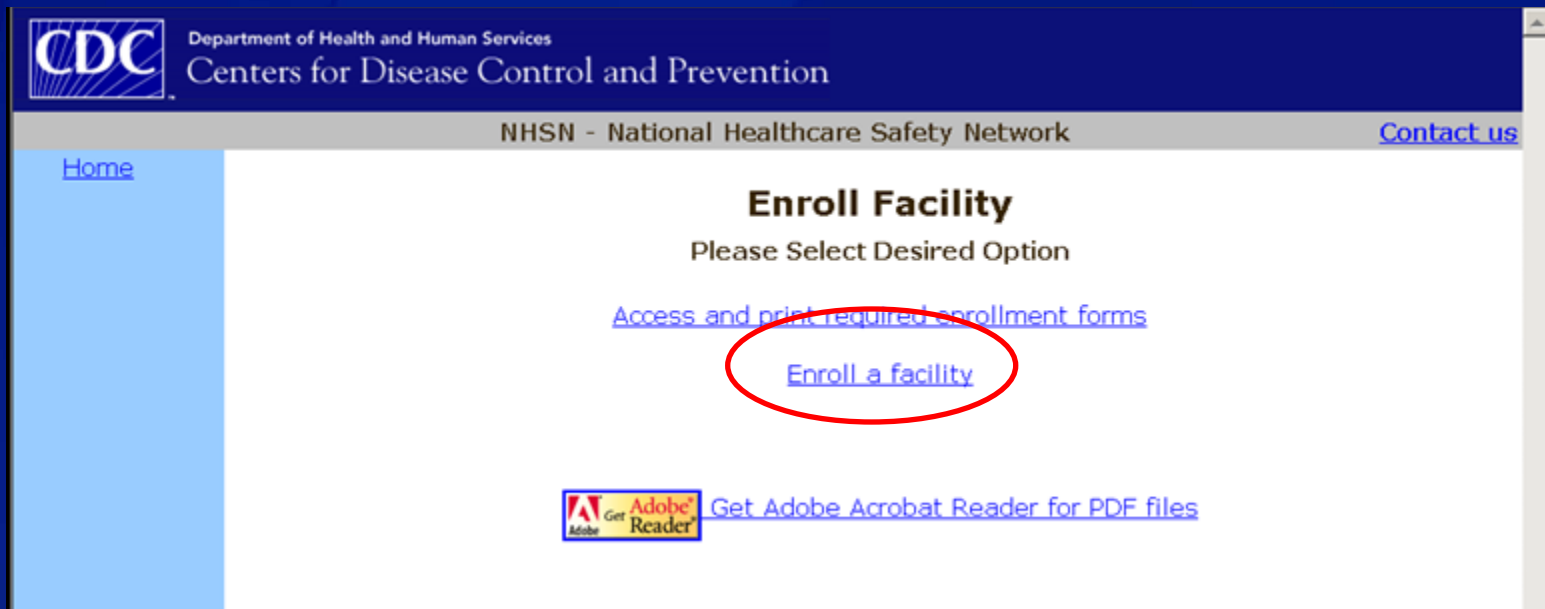
Morbidity and Mortality Weekly Report

This Week in MMWR August 11, 2006 / Vol. 55 / No. 31

- > [The Global HIV/AIDS Pandemic, 2006](#)
- > [HIV Prevalence Among Populations of Men Who Have Sex with Men ...](#)
- > [HIV Counseling, Testing, and Care of Tuberculosis Patients at Chest C...](#)

Recommendations and Reports August 11, 2006 / Vol. 55 / No. 31

Step 4 – Submit Forms Electronically



- ❑ Click "Enroll a facility"
 - If you have not completed the required forms, print and fill out the forms before continuing the "Enroll a facility" step by selecting "Access and print required enrollment forms"
- ❑ The Annual Facility Survey must be completed online during the enrollment process

Step 4 – Submit Forms Electronically

- ❑ Once required forms are submitted, the confirmation message will display



Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network

[Contact us](#)

[Start](#)

[Leave Enroll](#)

Enroll Facility

- ✓ The enrollment for facility 'Test Facility' with tracking number 99999 has been completed. The Facility Administrator will receive an email with further instructions.



Response from CDC: NHSN Facility enrollment submitted

- ❑ **The email will provide a link to access the “Agreement to Participate and Consent” form**
 - You have **30 days** to access the consent form
 - Consent form will open in a .pdf document
 - Once you have accessed the form, CDC must receive the signed form, by fax or email, within **60 days**
 - If you do not receive this email, contact the NHSN user support at nhsn@cdc.gov

Step 5 – Sign and Send Consent

- Agreement to Participate and Consent includes:
 - NHSN Purposes
 - Eligibility Criteria
 - Data Collection and Reporting Requirements
 - Assurance of Confidentiality
 - Consent form

NHSN **Agreement to Participate and Consent** Page 1 of 3

Tracking # _____

The National Healthcare Safety Network (NHSN), conducted by the Centers for Disease Control and Prevention (CDC), collects national data on healthcare-associated adverse events and their risk factors. Healthcare facilities may participate in NHSN for one of two reasons: (1) voluntarily, i.e., on their own initiative and for their own purposes or (2) as a result of a state or federal mandatory reporting requirement. Depending on the applicable state or federal mandatory reporting requirements, data provided by healthcare facilities to NHSN may be made accessible to state and/or federal agencies, or any other entity as prescribed by such requirements. In the absence of a state mandatory reporting requirement, NHSN patient safety component and healthcare personnel safety component data provided by healthcare facilities to NHSN will be made accessible or provided to a state agency at the request of that agency for surveillance and agency will be made to the extent permitted.

NHSN **Agreement to Participate and Consent** Page 2 of 3

Purposes of NHSN
The purposes of NHSN are to:

- Collect data from a sample of healthcare facilities to estimate the magnitude of healthcare-associated adverse events.
- Collect data from a sample of healthcare facilities to estimate the adherence to prevention practices.
- Analyze and report collected data.
- Provide facilities with risk-adjusted local quality improvement activities.
- Assist facilities in developing surveillance of patient and healthcare worker measures.
- Conduct collaborative research on epidemiology of emerging health threats, importance of potential risk factors of resistance, and evaluate alternative interventions.
- Comply with legal requirements, regulations, or other requirements for data collection, prevention practices, and healthcare personnel safety.
- Enable healthcare facilities to report to the U.S. Center for Medicare and Medicaid Services (CMS) for accreditation purposes.
- Provide state departments of health with data for surveillance, prevention, and control of healthcare-associated adverse events.

Eligibility Criteria
Facilities participating in NHSN must meet the following criteria:

- Be a bona fide healthcare facility that is listed in one of the (AHA), Centers for Medicare and Medicaid Services (CMS) and have email addresses for NHSN that they will use to access NHSN.

Eligibility Criteria (cont.)

- Comply with secure access control requirements of the system.
- Be willing to follow the selected NHSN component protocols exactly and report complete and accurate data in a timely manner during months when reporting data for use by CDC.
- Be willing to share such data with CDC for the purposes stated above.
- Be able to provide written consent for participation in NHSN by a member of the facility's chief executive leadership (i.e., the highest level administrator at a facility; typically the Chief Executive Officer, may be the Medical Director for outpatient facilities).

Data Collection and Reporting Requirements for Participation

- Once accepted into NHSN, each facility must:
- Use the NHSN Internet-based data entry system to report data to CDC.
- Successfully complete an annual survey.
- Successfully complete one or more modules as required by the following:
 - For the selected component, if any, of the modules will be submitted for a minimum of 6 months of the exception of the Biovigilance data for the entire year to maintain active status in NHSN.
 - Adhere to the selected module during the months when one or more surveillance methodology apply.
 - Report adverse events/exposures required for the module(s) in the end of the month.
 - For those months when the HAI exposures are reported, confirm accuracy.
 - Pass quality control acceptance accuracy.
- NHSN facilities must agree to report to a data repository identified in their facility by the CDC.
- Failure to comply with these requirements will be offered the opportunity to withdraw after withdrawal, a facility may apply for re-acceptance.

There is no fee for participation in NHSN.

NHSN **Agreement to Participate and Consent** Page 3 of 3

Consent Tracking # _____

Primary Contact(s)
As the Primary Contact(s), I/we consent to follow exactly the selected protocols and report complete and accurate data in a timely manner in order to maintain active status in NHSN.

NHSN Patient Safety Primary Contact Person

Name: _____
Title: _____
Signature: _____ Date: _____

NHSN Healthcare Personnel Safety Primary Contact Person
(If different from Patient Safety Primary Contact)

Name: _____
Title: _____
Signature: _____ Date: _____

NHSN Biovigilance Primary Contact Person

Name: _____
Title: _____
Signature: _____ Date: _____

Official Authorized to Bind this Facility To The Terms of This Agreement (e.g., COO/CEO/CFO; may be the Medical Director for outpatient facilities). As an official authorized to bind the facility specified below, I warrant that I have read and that I understand the terms of this agreement, including the updated purposes of NHSN, and hereby consent to allow the facility to participate in NHSN. I understand that the new NHSN purposes and data disclosures will begin with data entered no earlier than January 1, 2011.

Name: _____
Title: _____
Signature: _____ Date: _____
Facility Name: _____
Main Facility Telephone Number: _____
Street Address: _____
City: _____ State: _____ ZIP: _____



Step 5 – Sign and Send Consent

❑ Primary Contacts for Activated Components

- Fill in the contact information for all activated components
- All signatures *must* be original

❑ Official Authorization

- This section of the form must be completed by a C-level member of the facility (e.g., CEO, COO, CFO)

❑ The preferred method of returning the form is by fax

- The fax number can be found at the bottom of page 3 of the form

Step 5 – Sign and Send Consent

- ❑ 2-3 business days after NHSN receives signed consent form, NHSN will activate your facility
- ❑ NHSN email notification of facility activation

From: NHSN (CDC)
Subject: NHSN enrollment approved

To: NHSN Facility Administrator
From: NHSN
Subject: NHSN enrollment approved

Your facility or group has been approved as a new member of NHSN. Welcome!

Facility Name: Test Facility
Facility ID #: xxxxx

As the Facility Administrator, you will now need to access the NHSN application through the SDN by selecting the NHSN Reporting activity. Once in the NHSN application, your first task should be to add those individuals who need to use the application ("users").

Once you add a user, that person will receive an email prompting her/him to obtain a digital certificate.

If you have any questions about NHSN, please contact us at nhsn@cdc.gov or <http://www.cdc.gov/nhsn>.

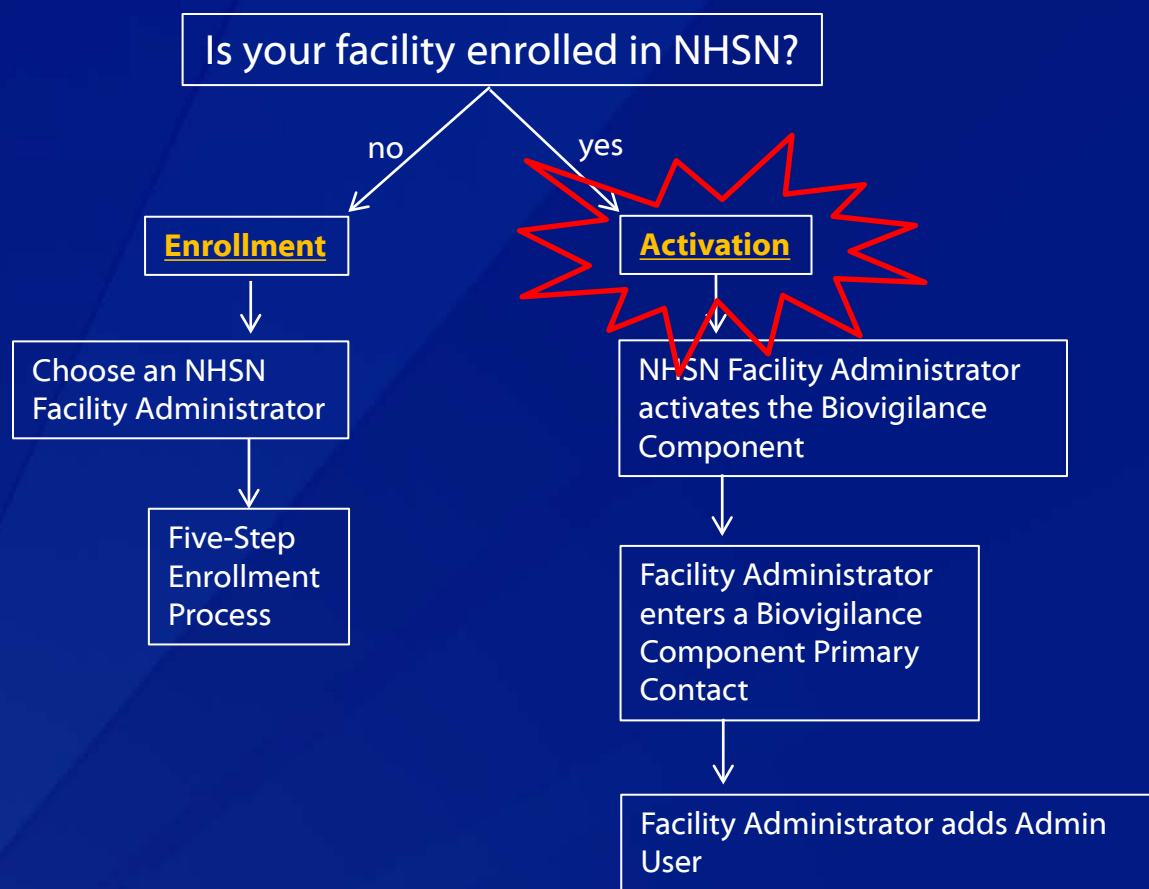


Enrollment is Complete

- ❑ **After enrollment is completed the Facility Administrator can:**
 - Add users and assign user rights
 - Map facility locations
 - Join Groups and share data

- ❑ **Once the Annual Facility Survey has been completed, the facility can enter Monthly Reporting Plans and begin reporting data to NHSN**

Getting Started in the Hemovigilance Module



- ❑ **Are you not unsure of your facility's status with NHSN?**
 - Email nhsn@cdc.gov



Activating Biovigilance Component for Existing NHSN Facilities

- ❑ **Only the NHSN Facility Administrator can activate a new component**
 - The Facility Administrator will designate a Primary Contact for the Biovigilance Component, i.e. someone who is familiar with the facility's transfusion services
- ❑ **Add the Primary Contact as a user and give them Administrative rights to the Biovigilance Component**
 - Being added as the Primary Contact for a component does not automatically add that person as a user
 - This user with Administrative rights will be able to add additional Biovigilance users and share data using the Group function for the Biovigilance Component

Activating the Biovigilance Component

- ❑ Facility Administrator logs into <https://sdn.cdc.gov>
 - Under 'My Applications' select NHSN Reporting
 - Log into any active component
- ❑ From the Home Page, click "Facility" then "Add/Edit Component"
- ❑ Facility Administrator enters a Biovigilance Primary Contact, adds them as a user, and gives them Administrative user rights

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network (ISD-CLFT-NHSN1:8081)

Logged into NHSN Test Harvey Memorial (ID 10611) as KOO.
Facility NHSN Test Harvey Memorial (ID 10611) is following the PS component.

NHSN Patient Safety Component Home Page

Use the Navigation bar on the left to access the features of the application.

Assurance of Confidentiality: The voluntarily provided information obtained in this application is collected with a guarantee that it will be held in strict confidence, will be used only for the purpose for which it was collected, and will be destroyed when no longer needed for the purpose for which it was collected, or the institution in accordance with Sections 304.20 and 304.21 of the Code of Federal Regulations.

NHSN maintenance may occur nightly between 12am and 6am Eastern time.

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Facility

- Customize Forms
- Policy Info
- Add/Edit Component**
- Locations
- Surgeons
- Group
- Log Out

Status:

Components Followed

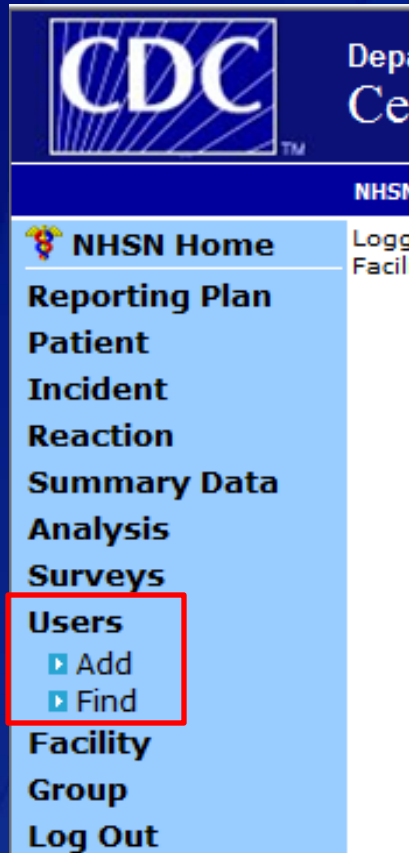
Component	Activated	Deactivated
<input checked="" type="checkbox"/> Biovigilance (Print Survey Form)	02/20/2009	
<input checked="" type="checkbox"/> Healthcare Personnel Safety	11/30/2005	
<input checked="" type="checkbox"/> Patient Safety	11/30/2005	

Contact Information [HELP](#)

Activating the Biovigilance Component

- ❑ **After the Facility Administrator adds the Biovigilance Component, the following must be completed:**
 1. Hemovigilance Module Annual Facility Survey
 - The survey does not have to be completed at activation, but must be completed before data entry
 - http://www.cdc.gov/nhsn/forms/biovigilance_forms.html
 2. Mapping locations
 - Confer with other component Primary Contacts before making changes to locations in NHSN
 3. Hemovigilance Module Monthly Reporting Plans
 - Must be completed for each month surveillance is conducted

Adding Users



- ❑ To add users to your facility, click **“Users”** on the navigation bar, then click **“Add”**
- ❑ **“Add User”** screen mandatory fields
 - User ID – created by the facility
 - First Name
 - Last Name
 - Email Address – Must be an active/correct address for the user
- ❑ **Any user with administrative rights can add users**

User Rights

- ❑ After saving the new user information, the “Edit User Rights” screen will appear
- ❑ Please be sure to confer the proper rights to users

CDC Department of Health and Human Services
Centers for Disease Control and Prevention

NHSN - National Healthcare Safety Network (ISD-CLFT-NHSN1:8081)

Logged into Pleasant Valley Hospital (ID 10312) as KOO.
Facility Pleasant Valley Hospital (ID 10312) is following the BV component.

Edit User Rights

HELP

User ID: **KOO (ID 2188)**

Facility List: **Pleasant Valley Hospital (10312)**

Rights	Biovigilance
Administrator	<input checked="" type="checkbox"/>
All Rights	<input checked="" type="checkbox"/>
Analyze Data	<input type="checkbox"/>
Add, Edit, Delete	<input type="checkbox"/>
View Data	<input type="checkbox"/>
Customize Rights	<input type="checkbox"/>

Advanced

Effective Rights Save Back

The person assigned as the Primary Contact must be given rights as Administrator

Location Mapping in NHSN

- ❑ **Facility locations are used to stratify data in NHSN**
- ❑ **Facility location information is shared across components**
 - Locations used in one component may be used in other components and should not be duplicated or deleted
 - Confer with other component Primary Contacts before making changes to locations in NHSN



Location Mapping in NHSN

- ❑ **Locations are defined as physical areas of a facility**
 - For the Biovigilance Component, locations are defined as any area where patients are transfused, could experience adverse reactions, and/or where products may be handled
- ❑ **Facility locations must be “mapped” to a standard CDC location code**
 - A list of CDC location codes, labels and descriptions can be found on the NHSN Web site under the Resource Library, NHSN Codes and Variables
 - <http://www.cdc.gov/nhsn/library.html>



Congratulations!



**Questions or Need Help?
Contact user support**

